



City of Huntington Beach

Department of Community Development

PERMIT DISCLOSURE FORM

2000 Main Street, Huntington Beach, CA 92648

Office: (714) 536 - 5241 Fax: (714) 374 - 1647

FOR OFFICE USE ONLY

Permit Number(s) _____ Address _____

WORKERS COMPENSATION DECLARATION ~CONTRACTORS ONLY~

I hereby affirm under penalty of perjury one of the following declarations:

(Please check one of the following)

D I have and will maintain a certificate of consent to self-insure for workers' compensation, issued by the Director of Industrial Relations as provided for by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. Policy No. _____

D I have and will maintain workers compensation insurance, as required by Section 3700 of the Labor Code, for the performance of the work for which this permit is issued. My workers' compensation insurance carrier and policy number are:

Carrier _____ Policy Number _____ Expiration Date _____

Name of Agent _____ Telephone No. _____

NOTE: This section need not be completed if the permit is for one hundred dollars [\$100] or less.

D I certify that in the performance of the work for which this permit is issued, I shall not employ any person in any manner so as to become subject to the workers' compensation laws of California, and agree that if I should become subject to the workers' compensation provisions of Section 3700 of the Labor Code, I shall forthwith comply with those provisions.

WARNING: FAILURE TO SECURE WORKERS' COMPENSATION COVERAGE IS UNLAWFUL, AND SHALL SUBJECT AN EMPLOYER TO CRIMINAL PENALTIES AND CIVIL FINES UP TO ONE HUNDRED THOUSAND DOLLARS [\$100,000]. IN ADDITION TO THE COST OF COMPENSATION, DAMAGES AS PROVIDED FOR IN SECTION 3700 OF THE LABOR CODE, INTEREST AND ATTORNEY'S FEES.

DECLARATION REGARDING CONSTRUCTION LENDING AGENCY

I hereby affirm under penalty of perjury that there is a construction lending agency for the performance of the work for which this permit is issued (Section 3097, Civil Code)

Lender's Name and Address _____

LICENSED CONTRACTOR'S DECLARATION

D I hereby affirm under penalty of perjury that I am licensed under provision of Chapter 9 (commencing with Section 7000) of Division 3 of the Business and Professional Code, and my license is in full force and effect.

License number _____ Class _____

Contractor _____

Signature of Applicant/Agent _____ Date _____